09-06-07   J|ω 2682

SEP 04 2007

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/040,653
Filing Date	October 19, 2001
First Named Inventor	Cascone et al.
Art Unit	2682
Examiner Name	Martin Lerner
Attorney Docket Number	A1SJ1888US

Total Number of Pages In This Submission 11

ENCLOSURES   *(Check all that apply)*

- [✔] Fee Transmittal Form
  - [ ] Fee Attached
- [✔] Amendment/Reply
  - [ ] After Final
  - [ ] Affidavits/declaration(s)
- [ ] Extension of Time Request
- [ ] Express Abandonment Request
- [ ] Information Disclosure Statement
- [ ] Certified Copy of Priority Document(s)
- [ ] Reply to Missing Parts/ Incomplete Application
  - [ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53

- [ ] Drawing(s)
- [ ] Licensing-related Papers
- [ ] Petition
- [ ] Petition to Convert to a Provisional Application
- [ ] Power of Attorney, Revocation Change of Correspondence Address
- [ ] Terminal Disclaimer
- [ ] Request for Refund
- [ ] CD, Number of CD(s) _____
  - [ ] Landscape Table on CD

Remarks

- [ ] After Allowance Communication to TC
- [ ] Appeal Communication to Board of Appeals and Interferences
- [ ] Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
- [ ] Proprietary Information
- [ ] Status Letter
- [✔] Other Enclosure(s) (please Identify below):
  - Itemized postcard

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	KOPPEL, PATRICK, HEYBL & DAWSON
Signature	*Richard S. Koppel*
Printed name	Richard S. Koppel
Date	9/4/07	Reg. No.	26,475

CERTIFICATE OF MAILING   Express Label No. EM 052650810 US

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

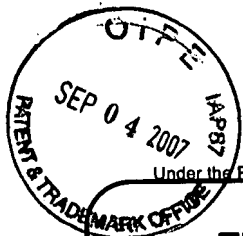| Signature	*Joan Harriman*		
Typed or printed name	Joan Harriman	Date	9/4/07

PTO/SB/17 (07-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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	Complete if Known	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **FEE TRANSMITTAL For FY 2007**	Application Number	10/040,653
	Filing Date	October 19, 2001
	First Named Inventor	Cascone et al.
☐ Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Martin Lerner
	Art Unit	2682
TOTAL AMOUNT OF PAYMENT ($) 0.00	Attorney Docket No.	A1SJ1888US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):_____

☑ Deposit Account   Deposit Account Number: 11-1580   Deposit Account Name: Richard S. Koppel

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
☐ Charge fee(s) indicated below, **except for the filing fee**
☑ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
☑ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	FILING FEES Small Entity Fee ($)	SEARCH FEES Fee ($)	SEARCH FEES Small Entity Fee ($)	EXAMINATION FEES Fee ($)	EXAMINATION FEES Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)
33 - 49 or HP =	0	x 50.00 =	0.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)
1 - 5 or HP =	0	x 200.00 =	0.00

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims

Fee ($)	Fee Paid ($)
_____	_____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ - 100 =	_____	/ 50 = _____ (round up to a whole number) x	_____ =	_____

4. OTHER FEE(S)

Fees Paid ($)

Non-English Specification, $130 fee (no small entity discount)   _____

Other (e.g., late filing surcharge):_____   _____

SUBMITTED BY			
Signature	*Richard S. Koppel*	Registration No. (Attorney/Agent) 26,475	Telephone (805) 373-0060
Name (Print/Type)	Richard S. Koppel		Date 9/4/07

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	:	10/040,653
Appeal	:	2007-0931
Applicants	:	Cascone et al.
Filed	:	Oct. 19, 2001
TC/A.U.	:	2682
Examiner	:	Martin Lerner
Docket No.	:	A1SJ1888US

Title: STATISTICAL SOUND EVENT MODELING SYSTEM AND METHODS

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Decision on Appeal dated July 25, 2007, kindly amend the above application as follows.

Amendments to the Specification - there are no amendments to the specification.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Drawings - there are no amendments to the drawings.

Remarks/Arguments begin on page 8 of this paper.

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